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## Lessons learned from a feasibility prospective study of palliative care eligible patients with chronic heart failure (CHF) and chronic obstructive pulmonary disease (COPD)

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**Background:** Initiation of PC practices in cardiology and pulmonology wards for patients with Chronic Heart Failure (CHF) and Chronic Obstructive Pulmonary Disease (COPD) remains a challenging topic.

**Objective:** A feasibility prospective study was designed and implemented in the cardiology and pulmonology wards of the University Hospital of Leuven (Belgium) to measure the quality of life (QoL) and the quality of care in both chronic CHF and COPD patients and their informal caregiver.

**Methods:** Eligible patients and their informal caregivers were asked to complete the Palliative Care Outcome Scale (POS), the Can Help Lite questionnaire and a self-developed ad-hoc questionnaire. These questionnaires were completed at inclusion and after a three-months follow-up. Informed consent was required.

**Results:** The feasibility assessment has overall been positive. The sample size (23 CHF and 25 COPD patients) was collected but older patients were underrepresented. The majority of the participants were younger and with milder symptomatology. Despite the well-designed eligibility criteria, it became necessary to readjust the recruitment process and directly involve the main researcher in the identification of eligible patients.

**Conclusion:** The positive feasibility assessment and the lessons learned from this study can assist similar future efforts in this area. However, the implementation of integrated PC interventions is expected to raise further challenges that will need to be investigated in separate studies.

### Biography

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